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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

THIS APPLICATION IS A CIP OF 09/584,936 05/31/2000 OK DSC

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

None DSC

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 10/26/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	
Verified and Acknowledged	Examiner's Signature <u>Shulevitz</u> Initials <u>DSC</u>	
ADDRESS	22470	
TITLE	Protocol disambiguation using a model-based methodology	
FILING FEE RECEIVED 798	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit

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